

## N THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor:	William A. Montemer	Examiner:	Rajiv J. Raj				
Application No.:	10/612,772	Art Unit:	3686				
Filed:	July 2, 2003	Docket No.:	ICHGP004				
Title:	METHODS AND SYSTEM FOR A DISTRIBUTED TRANSACTION CONTROL SYSTEM IN ENHANCED DIRECTORY ASSISTANCE SERVICES						

## CERTIFICATE OF MAILING

1 hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in a prepaid envelope addressed to:Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on:

Elaine Hguyen

## REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL FILED WITH AMENDMENT B

Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 CFR §1.114 of the above-identified application.

Sub	missio	n required und	er 37 CFR §1.114	
	a. 🗌	Previously su	bmitted: Consider the amendment(s)/reply under 37 CFR §1.116 previous	ly
		filed o	on	_
			Consider the arguments in the Appeal Brief or Reply Brief previous	ously
		filed o	on	75
			Other	10612772
	b. 🛛	Enclosed:		æ
		$\boxtimes$	Amendment/Reply	500685
			Affidavit(s)/Declaration(s)	9933

Information Disclosure Statement (IDS)

Other

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01 FF-1801

Fee Calculation: The fee for excess claims, if applicable, has been calculated as shown below.

			1	Small Entity			Large Entity		
				Rate	Fee		Rate	Fee	
RCE FILING F	EE			x \$405 = \$		OR	x \$810 = \$	810.00	
CLAIMS	After RCE	*HP	Extra						
Total	7	20		x \$26 = \$		OR	x \$52 = \$		
Independent	2	3		x \$110 = \$		OR	x \$220 = \$		
Multiple Dependent Claims -0-				x \$195 = \$		OR	x \$390 ≃ \$		
*HP = Highest previously paid			TOTAL FEES \$			TOTAL FEESS	810.00		

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Т	otal	7	20		П	х	\$26 = \$		OR	×	\$52 = \$		
	ndependent	2	3					OR	x \$220 = \$				
<u></u>	Multiple Dependent Claims -0-					х	\$195 = \$		OR	х	\$390 ≃ \$		
Ŀ	*HP = Highest previously paid					тот	AL FEESS			TOTA	AL FEESS	8:	10.00
2.	Miscel	laneous:		-									
	a.	☐ Su	spension of	of actio	n o	n th	e above-io	dentifie	d apr	olicat	ion is reau	ıeste	d under
		37 CFR §			n on the above-identified application is requested under iod of months.								
	b		her										
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3.	$\boxtimes$	Applicant	horoby no	titions	f	on .	artomoiom	af +:	on f	.11			
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						$\vdash$	SMALL ENTITY  Rate Add'l Fee			-	Rate E		Add'l Fee
	M Extensi	on for Response	within FIRS	Γ month		T	x \$65 = \$		1100	OR	x \$130 =	s	130.00
	Extensi	on for Response	within SECC	ND mont	th	x \$245 = \$				OR	x \$490 = \$		
	☐ Extension for Response within THIRD month					x \$555 = \$				OR	x \$1110 = \$		
$\vdash$	Extension for Response within FOURTH mont				th	x \$865 = \$			OR	x \$1730= \$			
	Extension for Response within FIFTH month					x \$1175 = \$				OR x \$2350 = \$			
6. \$ and 7. of t	t/or exten	Applicant Enclosed er 37 CFR § Please charg o cover the I sion of time If the requir t application (ICHGP004 Applicant In Please con	is our Che 1.17 (e), the control of	ck No. ne addit Accourage equired missin narge su	457 tion nt N un ng o ich	71 in nal co No. : der or an fees ques	the amount the amount feet, 150-0685 (2) 37 CFR §  y addition for credit to the form.	unt of S if any, ICHGF 1.17 (e nal fees any ov	940. and/o 2004 ), the are n	00 to or ext ) in t addi requir ymen	cover the ension of he amoun tional clai red during t to Depos	RCI time t of m fe the	E Fee fees. ee, if any pendency
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							D	To 40.4	661				

Date:	3-2-09	Zuree Da

Reg. No. 40,661 V 408-973-2592

F 408-973-2595

The PTO did not receive the following listed Item(s) \_ cleck for \$ 340,00 but we receive \$ 890,00

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